

## ISSUE SLIP STAPLE AREA (for additional cross references)

POSITION	INITIALS	ID NO.	DATE
<b>FEE DETERMINATION</b>			
<b>O.I.P.E. CLASSIFIER</b>			
<b>FORMALITY REVIEW</b>			

## INDEX OF CLAIMS

Rejected N

Allowed I

(Through numeral)... Canceled A

Restricted O

Non-elected

Interference

Appeal

Objected

Claim	Date
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5	✓ ✓ ✓ ✓
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Claim	Date
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Claim	Date
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If more than 150 claims or 10 actions  
staple additional sheet here